


# SUMMARY FORM

## COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

### Section I: Agreement Details

Public Employer: Hunterdon Central Regional High School County: Hunterdon 

Employee Organization: Hunterdon Central Regional High School Administrators Association Employees in Unit: 16

Base Year Contract Term: 7/1/2011 6/30/2015 New Contract Term 7/1/2015 6/30/2018

Type of Settlement: ☐ Mediated Settlement ☐ Fact-Finder Recommendation ☒ Voluntary Settlement ☐ Super Conciliation

		Column A Base Year - Total Costs (Last Year of Previous agreement)	Column B New Base Year - Total Costs (First Year of Successor agreement)
<b>Section II: Economic</b>			
Item 1 .....	Salary	\$1,942,842	\$1,997,166
Item 2 .....	Increment		
Item 3 .....	Longevity	\$34,350	\$33,250
Item 4 .....	Degree Stipend	\$34,170	\$31,230
Item 5 .....			
Item 6 .....			
Item 7 .....			
Item 8 .....			
Item 9 .....			
Item 10 .....			
Item 11 .....			
Item 12 .....			
Any additional items list on separate sheet Additional Items			
<b>Section III: Totals - sum of costs in each column</b>		\$2,011,362	\$2,061,646
		(Total)	(Total)

### Section IV: Analysis of new successor agreement

#### NEW AGREEMENT ANALYSIS

Total Base Year(previous agreement) \$2,011,362

Effective Date (m/d/yyyy)	7/1/2015	7/1/2016	7/1/2017			
Percent Increase .....	2.5	2.5	2.5			
Total cost of increase ..	\$50,284	\$51,541	\$52,830			
Total base salary (successor agreement) .....	\$1,997,166	\$2,042,532	\$2,090,562			

### Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 2.50

Dollar Impact (average per year over term of agreement) \$51,552.00

### Section VI

Health Insurance (indicate costs associated on each line)

	Base Year	Year 1				
Cost of Health Plan .....	\$206,951	\$206,951				
Employee Contributions .....	\$95,086	\$96,964				
Prescription .....	\$48,088	\$53,454				
Dental .....	\$16,635	\$16,635				
Vision .....	\$0	\$0				

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.

### Section VII

Prepared by: Gymlyn Corbin Title: Business Administrator

Gymlyn Corbin Print Name

Gymlyn Corbin Signature

Date: 9/11/2015